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State of Nebraska
Investigator's Motor Vehicle Accident Report

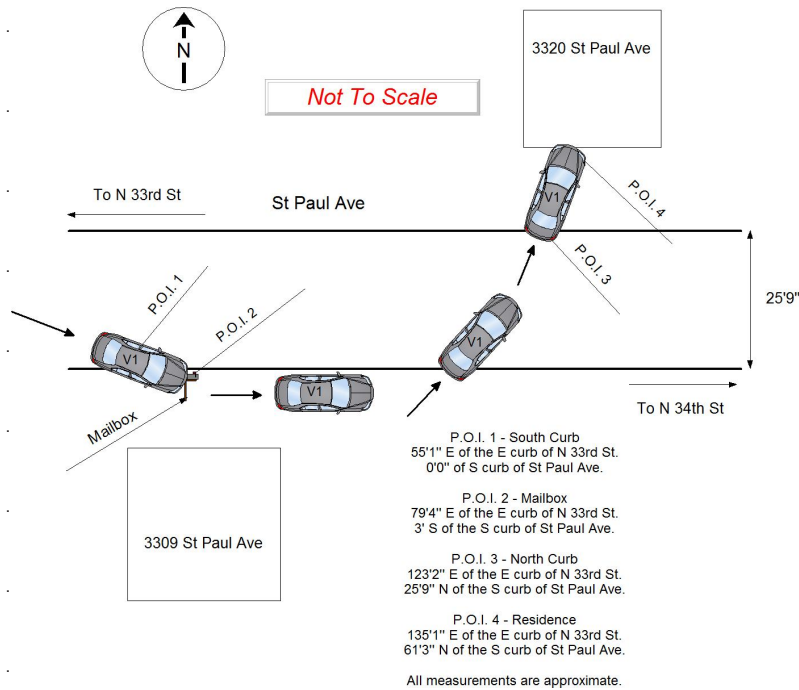
Sheet 1 of 2

1	Total Number of Vehicles	Local No./ District 012	Agency Case No. B6-043849	HIT & RUN? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	L 1
A/1	DATE OF ACCIDENT	M M / D D / Y Y Y Y S M T W T H F S 05/19/2016		TIME OF ACCIDENT 1810	STATE USE ONLY	
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 1811	05/20/2016	
B	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. St Paul Ave, N 33rd to N 34th Street			ONE-WAY STREET? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	LATITUDE
C	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.	LONGITUDE	
D	IF AT INTERSECTION			IF NOT AT INTERSECTION		
1	NAME OF INTERSECTING ROADWAY			<input checked="" type="checkbox"/> FEET <input type="checkbox"/> MILES N S E W	OF NEAREST STREET, BRIDGE, RAILROAD CROSSING	
V1/M	10			104.00 X N 33rd and St Paul Ave		
V2/M	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN					
E	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES	S1 S2 S3 S4 S5-a S5-b S6-a S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
F	VEHICLE NO. 1					
1	DRIVER LICENSE NO.	DRIVER Angela M Padilla			STATE (Of License)	SEX <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/> MALE
V1/N	1			PHONE No Phone	LOCAL NO.	
V2/N	TRANSIENT,			DATE OF BIRTH (MM / DD / YYYY)	12/08/1978	
G	2			OWNER Nevin Ross	PHONE UNK	LOCAL NO. DOB: UNK
H	5			OWNER ADDRESS 17400 W 10th Ave #202, Golden, CO 80401	CITATION <input checked="" type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO	CITATION NO. LB495274
V1/O	LICENSE PLATE PA NO. 423QTG	YEAR 2014	MAKE Nissan	MODEL Sentra	BODY STYLE 4 door Sedan	COLOR silver / chrome
3	VEHICLE ID NO. (VIN) 3N1AB7AP6EY255092	ESTIMATED DAMAGE <input checked="" type="checkbox"/> TOTALED \$			INSURANCE COMPANY Milbank Insurance Company	
V2/O	TOWED TO 101 Charleston	TOWED BY Captial Towing			POLICY NO. ACO 0009487	
I	VEHICLE NO. 2					
1	DRIVER LICENSE NO.	DRIVER			STATE (Of License)	SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE
V1/P	6			PHONE	LOCAL NO.	
V2/P	OWNER			DATE OF BIRTH (MM / DD / YYYY)	LOCAL NO.	
J	01			OWNER ADDRESS	CITATION <input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO	CITATION NO.
V1/Q	LICENSE PLATE NO.	YEAR	MAKE	MODEL	BODY STYLE	COLOR
V2/Q	VEHICLE ID NO. (VIN)	ESTIMATED DAMAGE <input type="checkbox"/> TOTALED \$			INSURANCE COMPANY	
K	01			TOWED TO	TOWED BY	
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)				DATE OF BIRTH (MM / DD / YYYY)	1 Seat Position	2 Eject
VEH. #	NAME	ADDRESS			3 Body Region	4 Injury Sev.
	LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME		5 Trans.	SEX M F
VEH. #	NAME	ADDRESS				
	LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME			
VEH. #	NAME	ADDRESS				
	LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME			

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B6-043849



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Amanda reported a vehicle had collided into her residence. Amanda was inside the residence when she heard a loud bang. Amanda exited the residence to find that a vehicle had collided into her residence causing a part of the exterior wall to collapse in. Ofcs. also found the mailbox of 3309 St Paul Ave to be destroyed. Ofcs. could see the tire tracks from the mailbox to the residence. Prior to Ofcs. arrival the driver of V1 fled the area. Later in the night Ofcs. were able to contact the driver of V1, Angela. Angela admitted to driving V1 when the accident occurred and ran from the scene.

PROPERTY	OBJECT DAMAGED Mailbox destroyed	OWNER NAME Jason D Wood (DOB: 01-07-1984)	ADDRESS 3309 St Paul Ave, Lincoln, NE 68504	PHONE 402-405-4267	APPROX. COST OF DAMAGE \$ 200
	OBJECT DAMAGED Vehicle ran into res	OWNER NAME Amanda R Olson (DOB: 11-26-1988)	ADDRESS 3320 St Paul Ave, Lincoln, NE 68504	PHONE 402-340-9608	APPROX. COST OF DAMAGE \$ 8500
WITNESSES	NAME ADDRESS				PHONE
	NAME ADDRESS				PHONE

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA				AIRBAG DEPLOYED VEHICLE 1				RESTRAINT USE VEHICLE 1				TOTAL OCCUPANTS				
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME				(Enter numbers for each vehicle)											
1			X		St Paul Ave															
2																				
1	01				06 Turning left															
2					08 Entering traffic lane															
					01 Essentially straight ahead															
					02 Backing															
					03 Changing lanes															
					04 Overtaking/ Passing															
					05 Turning right															
					09 Leaving traffic lane															
					10 Parked															
					11 Slowing or stopped in traffic															
					12 Other															
					13 Unknown															

VEHICLE 1	VEHICLE 2
POINT OF IMPACT	POINT OF IMPACT
01	
MOST DAMAGED AREA	MOST DAMAGED AREA
01	

VEHICLE 1	VEHICLE 2
1 Deployed - front	
2 Deployed - side	
3 Deployed - both front/side	
4 Not deployed	
5 Not applicable/ No airbag available	
6 Unknown	

VEHICLE 1	VEHICLE 2
1 None used - vehicle occupant	
2 Lap & shoulder belt used	
3 Shoulder belt only used	
4 Lap belt only used	
5 Child safety seat used	
6 Child booster seat used	
7 DOT approved helmet used	
8 Costume helmet used	
9 Restraint use unknown	

ALCOHOL TESTING	Driver No. 1	Driver No. 2	Pedestrian
Y		Y	Y
N	X	N	N

ALCOHOL/ DRUGS SUSPECTED	Driver No. 1	Driver No. 2
2		

1 Neither alcohol nor drugs suspected	
2 Yes - alcohol suspected	
3 Yes - drugs suspected	
4 Yes - alcohol & drugs suspected	
5 Unknown	

OFFICER NO. 1740	TROOP/ TEAM/ BEAT 11	DEPARTMENT Lincoln Police Department	Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
INVESTIGATOR NAME (Print or Type) Aaron Rensch		INVESTIGATOR SIGNATURE Approved by Aaron Rensch	
DATE OF REPORT 05/20/2016			